

**MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

107069672

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9	1					
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50						
TOTAL IND.	3					
TOTAL DER.	28					
TOTAL CLAIMS	31					

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	IND.	DER.	IND.	DER.	IND.	DER.
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99						
100						
TOTAL IND.						
TOTAL DER.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS